

● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : <u>10/796 509</u>	Examiner : <u>Berch</u>	GAU : <u>1624</u>
From: <u>PAP</u>	Location: <u>(IDC) FMF FDC</u>	Date: <u>11/17/05</u>

Tracking #: EPM 10/796509 Week Date: 7/18/05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> ELM	<u>6/30/05</u>	<input type="checkbox"/> Document Legibility
<input checked="" type="checkbox"/> IIFW	<u>7/12/05</u>	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Original claims 22-62 depend on cancelled original claim 1. Please advise.

Thank you.

[XRUSH] RESPONSE: _____

INITIALS: _____

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04